

09/9374

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			
O.I.P.E. CLASSIFIER			10-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date	Claim	Date	Claim	Date
Final		Original		Final	
1	11-15-02	Original		51	101
2				52	102
3				53	103
4				54	104
5				55	105
6				56	106
7				57	107
8				58	108
9				59	109
10				60	110
11				61	111
12				62	112
13				63	113
14				64	114
15				65	115
16				66	116
17				67	117
18				68	118
19				69	119
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21				71	121
22				72	122
23				73	123
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32				82	132
33				83	133
34				84	134
35				85	135
36				86	136
37				87	137
38				88	138
39				89	139
40				90	140
41				91	141
42				92	142
43				93	143
44				94	144
45				95	145
46				96	146
47				97	147
48				98	148
49				99	149
50				100	150

If more than 150 claims or 10 actions  
staple additional sheet here

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